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CONFIRMATION NO. 4739

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/710,740	07/30/2004	235	2876	0496046360
RULE				

APPLICANTS

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 Laura P. Barton, Englewood, CO, Legal Representative;

** CONTINUING DATA *****

This application is a CON of 10/248,345 01/10/2003 which is a CIP of 09/326,298 06/04/1999 ABN
 which is a CON of 09/294,270 04/19/1999 ABN
 and said 10/248,345 01/10/2003 — *pending*
 is a CIP of 10/259,190 09/27/2002 ABN
 which is a CON of 09/474,110 12/29/1999 — *ABN*
 which claims benefit of 60/165,546 11/15/1999 — *expired*
 and said 10/248,345 01/10/2003 — *pending*
 is a CIP of 09/474,378 12/29/1999 ABN
 which claims benefit of 60/165,547 11/15/1999 — *expired*
 and said 10/248,345 01/10/2003 — *pending*
 is a CIP of 09/471,744 12/23/1999 ABN
 and is a CIP of 10/284,056 10/30/2002 ABN
 which is a CON of 09/614,302 07/12/2000 ABN
 which is a CIP of 09/471,744 12/23/1999 ABN
 and said 10/248,345 01/10/2003 — *pending*
 is a CIP of 10/331,142 12/27/2002 ABN
 which is a CON of 09/476,175 12/30/1999 ABN
 which claims benefit of 60/164,169 11/09/1999

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

09/08/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NE	28	48	14
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

24728

TITLE

ANONYMOUS MAILING AND SHIPPING TRANSACTIONS

☐ All Fees

<p>FILING FEE RECEIVED 2220</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Credit _____</td> </tr> </table>	<input type="checkbox"/>	1.16 Fees (Filing)	<input type="checkbox"/>	1.17 Fees (Processing Ext. of time)	<input type="checkbox"/>	1.18 Fees (Issue)	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Credit _____
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